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At the turn of the last century, C. G. Jung began his career as a psychiatrist. During the next decade, three men whose names are famous in the annals of medical psychology influenced his professional development: Pierre Janet, under whom he studied at the Salpétrière Hospital in Paris; Eugen Bleuler, his chief at the Burghölzli Hospital in Zurich; and Sigmund Freud, whom Jung met in 1907. It is Bleuler, and to a lesser extent Janet, whose influence bears on the studies in descriptive and experimental psychiatry composing Volume 1 of the Collected Works. These papers appeared between 1902 and 1905; all but one are now being published in English for the first time.

The volume opens with Jung's dissertation for the medical degree: "On the Psychology and Pathology of So-called Occult Phenomena," a study that foreshadows much of his later work and as such is indispensable to all serious students of his work. It is the detailed analysis of the case of an hysterical adolescent girl who professed to be a medium. The volume also includes papers on cryptomnesia, hysterical parapraxes in reading, manic mood disorder, simulated insanity, and other subjects.

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BOLLINGEN SERIES XX

THE COLLECTED WORKS OF C. G. JUNG

VOLUME 1

EDITORS
SIR HERBERT READ
MICHAEL FORDHAM, M.D., M.R.C.P.
GERHARD ADLER, PH.D.

PSYCHIATRIC STUDIES

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C. G. JUNG

TRANSLATED BY R. F. C. HULL

BOLLINGEN SERIES XX

PANTHEON BOOKS

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PUBLISHED FOR BOLLINGEN FOUNDATION INC.
BY PANTHEON BOOKS, INC., NEW YORK, N. Y.

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EDITORIAL PREFACE

The publication of the first complete collected edition, in English, of the works of C. G. Jung has been undertaken by Routledge and Kegan Paul, Ltd., in England and by the Bollingen Foundation, Inc., through Pantheon Books, Inc., in the United States. The edition contains revised versions of works previously published, such as *The Psychology of the Unconscious,* which is now entitled *Symbols of Transformation;* works originally written in English, such as *Psychology and Religion;* works not previously translated, such as *Aion;* and, in general, new translations of the major body of Professor Jung's writings. The author has supervised the textual revision, which in some cases is extensive.

In presenting the Collected Works of C. G. Jung to the public, the Editors believe that the plan of the edition * may require a short explanation.

The editorial problem of arrangement was difficult for a variety of reasons, but perhaps most of all because of the author's unusual literary productivity: Jung has not only written several new books and essays since the Collected Works were planned, but he has frequently published expanded versions of texts to which a certain space had already been allotted. The Editors soon found that the original framework was being subjected to severe stresses and strains; and indeed, it eventually was almost twisted out of shape. They still believe, however, that the programme adopted at the outset, based on the principles to be outlined below, is the best they can devise.

An arrangement of material by strict chronology, though far the easier, would have produced a rather confusing network of subjects: essays on psychiatry mixed in with studies of religion, of alchemy, of child psychology. Yet an arrangement according to subject-matter alone would tend to obscure a view

* See announcement at end of this volume.

of the progress of Jung's researches. The growth of his work, however, has made a combination of these two schemes possible, for the unfolding of Jung's psychological concepts corresponds, by and large, with the development of his interests.

C. G. Jung was born in northeastern Switzerland in 1875, a Protestant clergyman's son. As a young man of scientific and philosophical bent, he first contemplated archaeology as a career, but eventually chose medicine, and qualified with distinction in 1900. Up to this time, Jung had expected to make physiological chemistry his special field, in which a brilliant future could be expected for him; but, to the surprise of his teachers and contemporaries, he unexpectedly changed his aim. This came about through his reading of Krafft-Ebing's famous *Text-Book of Insanity*, which caught his interest and stimulated in him a strong desire to understand the strange phenomena he there found described. Jung's inner prompting was supported by propitious outer circumstances: Dr. Eugen Bleuler was then director of the Burghölzli Mental Hospital, in Zurich, and it was under his guidance that Jung embarked on his now well-known researches in psychiatry.

The present volume, first of the Collected Works, though not large, is sufficient to contain the studies in descriptive psychiatry. It opens with Jung's first published work, his dissertation for the medical degree: "On the Psychology and Pathology of So-called Occult Phenomena" (1902), a study that adumbrates very much of his later work. But clearly a man of Jung's cast of mind could not be content with simple descriptive research, and soon he embarked upon the application of experimental psychology to psychiatry. The copious results of these researches make up Volume 2 and Volume 3. Jung's work brought about the transformation of psychiatry, as the study of the psychoses, from a static system of classification into a dynamic interpretative science. His monograph "The Psychology of Dementia Praecox" (1906), in Volume 3, marks the peak of this stage of his activity.

It was these experimental researches that led Jung to a fruitful if stormy period of collaboration with Freud, which is represented by the psychoanalytic papers in Volume 4. The chief work in this volume, "The Theory of Psychoanalysis" (1913), gives at length his first critical estimation of psycho-

chology as a system.

wanted to see in print.

•

text, this is stated.

fully indexed.

•

and Pathology of So-called Occult Phenomena.' The translation of the latter by M. D. Eder has been consulted, but for the main the present translations are new. It may be noted that except for the 1906 English version of the 'Occult Phenomena' none of these papers has ever been republished by Professor Jung.

An effort has been made to point out the bibliographical details of the material with which were sometimes abbreviated in the medical publications of the 1900's.

Acknowledgments are made to George Allen and Unwin Ltd. for permission to quote passages from Freud's *The Interpretation of Dreams* and from Nietzsche's *Thus Spake Zarathustra*.

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I

ON THE PSYCHOLOGY AND PATHOLOGY OF SO-CALLED OCCULT PHENOMENA

ON HYSTERICAL MISREADING

ON THE PSYCHOLOGY AND PATHOLOGY OF SO-CALLED OCCULT PHENOMENA[1]

[1. Introduction]

In the wide domain of psychopathic reciprocity from which scientific research has marked out the typical provinces of epilepsy, hysteria and neurasthenia, we have succeeded in observing a certain number of rare states which, in spite of their great importance, have not yet been fully described. These states, which appear sporadically in the course of the above-mentioned psychoneuroses, and sometimes also in the form of periodic insanity, are characterized by somnambulism, pathological absentmindedness, pathological lying, etc.

The above-mentioned states sometimes exhibit certain symptoms which, to a superficial observer, may give the impression of genuine occult phenomena, and sometimes they may even be mistaken for symptoms of disease by experts. The patients

[illegible]

Editors.

Über drei Fälle von 'Hysteria magna'" (1900), p. 998

servations.

Several times she tried to leave the room.

forgotten the details

mon. The [illegible] with sexual content.[4]

52 The corpse was [illegible] our patient and [illegible] ing attacks [illegible] epilepsy. Here too there are [illegible] In contrast to pronounced [illegible] I will give two examples.

53 A [illegible] by [illegible] venus. She saw [illegible] by wild beasts [illegible] attacks.[5]

54 A [illegible] saw the [illegible] draw [illegible]

55 These [illegible] of the [illegible] which [illegible] attacks [illegible] pseudo [illegible] attacks [illegible] stereotypes [illegible] different [illegible] own [illegible] relates it to those found in somnambulism.

56 Charcot[7] divides somnambulism into two basic forms.

a) [illegible] with marked inco-ordination of [illegible] and actions

[4] *Text-Book of Insanity* [illegible]

[5] Richer, *Études cliniques* (1881), p. 483.

[illegible]

the waking state

he was normal

p. 405

[20] *Tribune médicale*, 23rd year (1890)

pockets.

Complete amnesia for the interval

[1] *The Principles of Psychology* (1890) I, p. 391

[illegible]

11 Gurney and Myers. We have come on the following experiments with mesmerism: "A lady was hypnotized in front of a female patient in a state of [illegible] and the operator saw a picture of her mother in the looking-glass. A real glass was then set in a frame, and a picture of her mother was seen by all present in a low dress.

13 Myers's case recalls the cases [illegible] memory

14 Ma Nost [illegible] Although [illegible] young woman [illegible] [illegible] [illegible]

gesti- ay. In Mesmer's case we observe the transference of hal- cinatory processes through simple symbols of touch. The patient's sole reaction was to these simple perceptions for the auto-hypnotic constellation of the unconscious which took possession of his personality was shown by the fact that he could not take possession of his personality. We have to take a somewhat wider view of the nature of our patient at any rate [illegible] strengthen this conjecture.

[illegible] [illegible] [illegible] [

purely motor or visual area.

know that psychopathic inferiority may give rise to various kinds of epileptoid attacks whose classification under epilepsy or hysteria is at least doubtful. Thereupon West said:

On the basis of numerous observations I maintain that the so-called epileptoid attacks form one of the most frequent and most frequent symptoms in the psychopathic diseases we reckon among the mental diseases and that the more frequent of these or more epileptoid attacks is whether or not the character and form of the disease or to its cause a prognosis.

As already mentioned I have used the term "epileptoid" in the widest sense for the attack itself.[17]

30 The epileptoid elements in our case are not far to seek on the one hand one can never rule out the coloring of the whole picture as hysterical on the one. As against this we must point out that at every rise of sound and also in fact to hysteria. Of course states of true typical epilepsy would not enter so readily into with somnambulistic states, or with hysterical attacks by the admixture of genuine convulsions.[18]

31 As Dr. [redacted] has shown psychasthenic inferiority may also give rise to [redacted] of [redacted] use the diagnosis. A delirious content [redacted] can repeat itself in stereotyped form on each [redacted] Moreover [redacted] recently published the case of an epileptoid neurasthenic [redacted].[19]

32 I was invited to Professor [redacted] following case. An [redacted] with epileptoid attacks [redacted] Without any [redacted] such as [redacted] he [redacted] a hole [redacted] stone [redacted] spoon [redacted] He was [redacted] and had only a [redacted]

17 "Agoraphobie" (1872), p. 158

18 Pick, "Vom Bewusstsein in Zuständen sogenannter Bewusstlosigkeit" (1884, p. 401) and Pelman, "Über das Verhalten des Gedächtnisses bei den verschiedenen Formen des Irreseins" (1864), p. 78

19 Neurasthenische Krankheitsbilder [redacted] "Here [redacted] they [redacted] general [redacted] makes a [redacted] often been deceived in this way."

20 *Über Dämmerzustände* (1901), case 32, p. 75

33 [illegible] we must conclude also [illegible] attacks of our patients [illegible] a certain [illegible] degree [illegible] but [illegible] [illegible] the [illegible] [illegible] [illegible]

French and English workers. It therefore seems at least desirable that our literature should be enlarged in this respect. These reflections have prompted me to publish some observations which will perhaps help to broaden our knowledge of the relations between hysterical twilight states and the problems of normal psychology.

A Case of Somnambulism in a Girl with Occult Inheritance (Spiritualistic Medium)

96 The following case was under my observation during the years 1899 and 1900. As I was not in medical attendance upon Miss S. W. unfortunately no physical examination for hysterical stigmata could be made. I kept a detailed diary of the seances, which I wrote down after each sitting. The report that follows is a condensed account from these notes. Out of regard for Miss S. W. and her family a few unimportant data have been altered and various details omitted from her romances, which for the most part are composed of very intimate material.

[*Anamnesis*]

97 Miss S. W. is 15 years old. Protestant. The paternal grandfather was very intelligent, a clergyman who frequently had waking hallucinations, mostly visions of ten whole dramatic scenes with dialogues etc. Another of her grandfather was feeble-minded and eccentric, and also saw visions. One of his sisters was also a peculiar old character. The paternal grandmother, after a feverish illness at her twentieth year, typhoid fever, had a titanic appetite for three days, from which she did not begin to awake until the crown of her head was burnt with a red-hot iron. Later on, when emotionally excited, she had alarming fits, but these were nearly always followed by a brief somnambulism which has quite altered her character. The father is a weak, good-natured person, with bizarre ideas. Two of his brothers were the same. All three had waking hallucinations. Second sight, premonitions etc. Another brother is a confirmed drunkard, but otherwise talented. The mother was a congenital psychopathic inferiority, often bordering on hysteria. One sister

gus heart-attacks."

38

pars. 51ff., below.—EDITORS.]

[*Somnambulistic States*]

99 [illegible] especially in the trance stage

[illegible]

[illegible]

were similar but less intense.

spontaneously as a rule during the [illegible] and it always began by [illegible] table was going [illegible] after a short [illegible] passed [illegible] pressed [illegible] questions [illegible] set a [illegible] [illegible] [illegible]

96

open carriage

97

she maintained an obstinate silence

98

[illegible]

any suggestions

[illegible]

father

[illegible] [illegible] [illegible] [

[illegible]

[illegible]

[illegible]

Following

Be firm and true in thy believing,
To faith in God cling ever nigh,
Thy heavenly comfort never leaving.
Which having, man can never die
Refuge in God is peace for ever
When earthly cares oppress the mind,
Who from the heart can pray is never
Bow'd down by fate howe'er unkind

longer periods.

who spoke North German

arbitrary fashion

dwellers do not have a human shape but the most laughable ones imaginable such as no one could possibly conceive. Human spirits who get permission to travel in the Beyond are not allowed to set foot on the stars. Such heavenly travelling star-dwellers may float down to earth but never to a distance of some feet above its surface. Should they ever venture to draw even nearer to the power of the earth and must take on human bodies, from which they are freed only after their natural death. As human beings they are cold and hard-hearted and vain. You can recognize them by their peculiar expression which lacks the spiritual and by their expressionless eyes, waxen, sharply cut faces. Napoleon I was a typical star-dweller.

60 On her journeys she could not see the powers through which she hastened. She had only the glaring flame and the spirits around her when she was in the right spot. Then as a rule she saw only the face and sometimes also the person before whom she wished to appear or whom she wanted to see. She could seldom say in what kind of surroundings she saw the person. Occasionally she saw me but only my head with nothing back ground. She was much occupied with her enchanting spirits and for this purpose wrote down sayings in a foreign tongue on scraps of paper which she kept in all sorts of queer places. Especially disconcerting to her was the presence in my house of an Italian manservant named Giovanni. She tried several times to draw such an one but without any knowledge concealed several pieces of paper about the place which were later found by accident. On one of them I read the following message written on it (in red pencil):

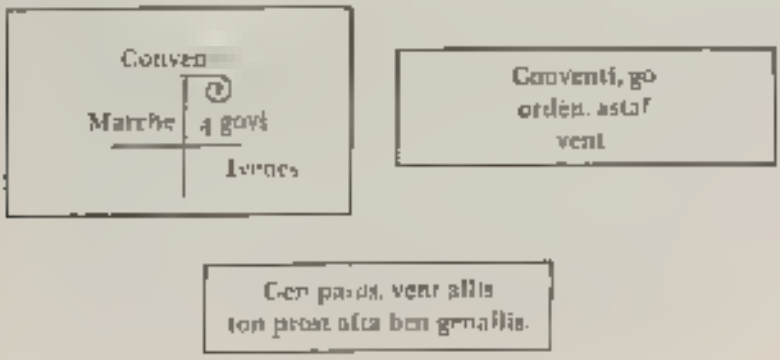


Figure 1

[illegible] fortunately I never managed to get a train from [illegible] to [illegible]

[illegible] Occasionally she would [illegible] space [illegible] to [illegible] [illegible] [illegible]

from the eighteenth century, and so on

several weeks later a new and complicated romance would suddenly make its appearance, later always explaining the striking relationship by means of pre-existences or illegitimate liaisons. Persons appearing in S. W.'s life and very close relatives. Especially romances with the exception of the one described above were all concealed very carefully so that it was a work of great difficulty to track them down. They were discovered with the most astonishing speed and often surprised us by the extreme youth of such [illegible] S. W. must have been [illegible] Most of the romances had a pretty gruesome character [illegible] by poison and dagger, seduction and banishment. Love of wife and secret played a prominent role.

Mystic Science

65 S. W. was subjected to numerous suggestions in regard to scientific researches [illegible] by [illegible] and the scances, various successful [illegible] of spiritual nature were discussed. She declared S. W. [illegible] part of the conversation was sat dreamily with a [illegible] in a [illegible] and [illegible] Shortly afterwards she [illegible] and drew [illegible] catching it on a [illegible] drawn [illegible] never gave a coherent account of [illegible] asked to elaborate it, she only answered understood [illegible] In the course of the summer various [illegible] became [illegible] sciences. [illegible] brought her strange [illegible] which she would [illegible] Once she refused to give [illegible] because [illegible] Once she refused to give [illegible] because [illegible] which she [illegible] In March 1900 [illegible] [illegible] she showed [illegible] and with a postscript that she had [illegible] Sketch [illegible] long narrow strip of paper [illegible] Despite my request she [illegible] afterwards but told me to draw a diagram [fig. 2]

66 I can remember [illegible] he would [illegible] upon we spoke several times on S. W.'s [illegible] attractive and repulsive forces in connection with [illegible] *Natural History and*

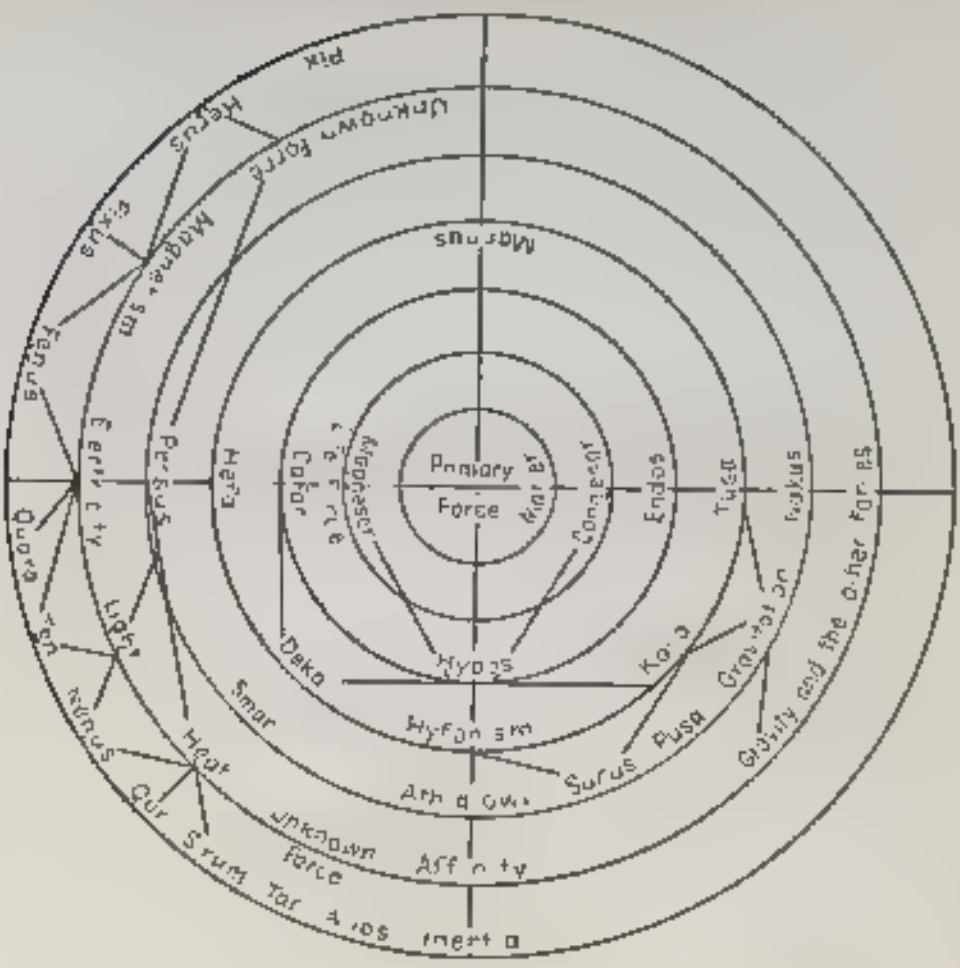


Figure 8

Theory of the Heavens,[18] also of the law of the conservation of energy, of the different forms of energy and of whether the force of gravity is also a form of motion. From these texts Miss S. W. has evidently derived the foundations of her invisible system. She gave the following explanations. The forces are arranged in seven circles. Outside these there are three more containing unknown forces midway between force and matter. Matter is found in seven outer circles surrounding the seven inner ones.[19] In the centre stands the Primary Force. This is

[18] Kant, *Cosmogony or a Dissertation on the Retardation of the Rotation of the Earth and Its Nature, a History and Theory of the Heavens*, ed. and trans. W. Hastie (Glasgow, 1900).—Editors.]

[19] Note that the diagram shows only the first seven inner circles.—Editors.]

cussed below; it leads over to:

spoke of it no more

Termination of the Disorder

[illegible] further abnormalities have come to light

[3. Discussion of the Case]

[illegible] ferent states under separate heads.

The Waking State

[illegible]

[illegible]

[illegible]

hysterical disturbance is unravelling. The psychology of this process may be represented as follows. When reacting with a perception or an idea the will turns towards some object. Meanwhile the reacting consciousness receives the sense impression of the word as sound. Owing to the connection that has existed between the perceptive centre as represented by the sound impression of the word and the object perceived, a way is made for perceptive activity to the object. All other words are then associated with any new sense impression. Each new impression is related with previous impressions.

The sense impression of the word is received by the hearing. Owing to the connection that has existed between the sound impression of the word and the object perceived, a way is made for perceptive activity to the object. All other words are then associated with any new sense impression. Each new impression is related with previous impressions.

and spontaneously.

[28] *Alterations of Personality*, pp. 105f.

remarkable somnambulistic attacks and therefore disappeared from the waking state. Such as the development of her nervous character is concerned, [illegible] a significant increase in a very noticeable change could not be observed in the course of observations lasting nearly two years. On the other hand, it is worth mentioning that in the two weeks since the subsequent reappearance of the somnambulistic attacks a mixed-natured change of character has taken place. We shall have occasion later on to speak of this gradual change in this observation.

Semi-Somnambulism

77 In my [illegible] I [illegible] the following [illegible] was [illegible] by the term [illegible] but [illegible] hyperæsthesia [illegible] the [illegible] [illegible] [illegible] [illegible] temporary [illegible] and a state [illegible] [illegible] [illegible] [illegible]

but is, his conscious self-reflecting ego, having the least idea that such is the case.[39]

78 Binet[40] says of the term "semi somnambulism".

[illegible]

Automatisms

79 Semi somnambulism is characterized by the co-existence of consciousness with that of the waking state and by the appearance of various automatisms which point to the existence of a subconscious personality of the second rank.

80 Our case shows the following phenomena:

(1) Automatic movements of the table.
(2) Automatic writing
(3) Hallucinations.

81 (1) AUTOMATIC MOVEMENTS OF THE TABLE. [illegible] patient came under the observation of the [illegible] by the suggestion of [illegible] as to [illegible] was a particular game. As soon as [illegible] the table [illegible] began to move and by [illegible] was at once recognized as a medium. [illegible] as soon as her hands were placed [illegible] the table began to move. [illegible] Here was some deliberate pushing [illegible] the part of the patient.

82 As we know from the investigations of Crawford, Geley, Lehmann and others[3] [illegible] are not only a frequent occurrence among [illegible] persons and those [illegible] but can also be produced [illegible] persons who [illegible] as controls. I have myself had many experiments [illegible] and am convinced [illegible] In the great majority of cases

[39] [illegible]
[40] [illegible]
[3] [illegible] pp. 221ff.

way by experiments with the pendulum

ng. The experimenter then takes over the suggestions and moves his hands back considerably strengthened by the rare yet exactly the same movement, mostly a few seconds later, and in this way reveals the agent's conscious or unconscious thought. This simple mechanism may give rise to instances of thought reading which are quite bewildering at first sight. A very simple experiment that works in many cases even with unpractised persons will serve to demonstrate this. The experimenter thinks, say, of the number 4 and then waits with his hands quietly resting on the table until he feels it making the first move to announce the number thought of. He thus has his hands off the table immediately and the number can be correctly tapped out. It is advisable in this experiment to stand the table on a soft thick carpet. By paying close attention, the experimenter will occasionally notice a movement of the table that can be represented thus:

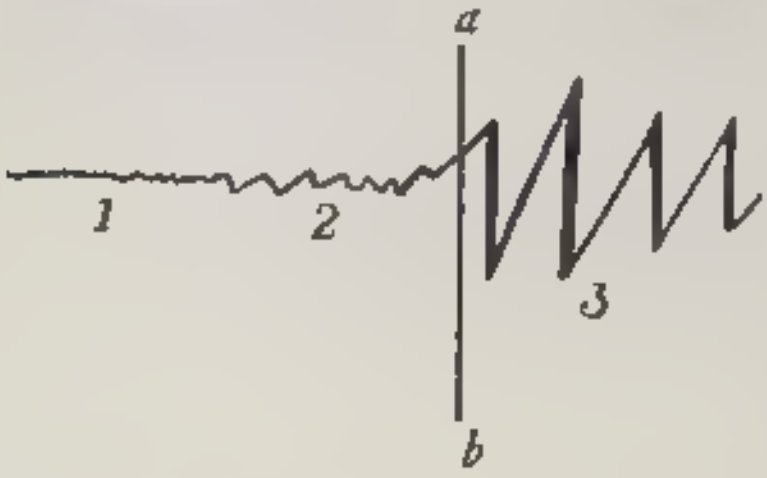


Figure 3

a. Inertia tremors too slight to be perceived by the subject.

b. Very small but perceptible displacements of the table which are now first detected as beginning to tremble.

c. The big movements that tell off the table giving the number 4 that was thought of.

d. Tension ceases at the moment when the operator's hands are removed.

This experiment works extremely well with well disposed but inexperienced persons. After a little practice the phenomenon

nosis into the speech area

83 Preyer, *Die Erklärung des Gedankenlesens* (1886).

[redacted]

89

3RD DAY

What is mane *Tefi hasi estote hes*
Is that an anagram? *Yes*
How many words does it conta m? — *Five*
What is the first word? — *See*
What is the second word? — *Eeeee*
SEE? Shall I interpret it myself *Try to!*

[redacted]

his own. He therefore went on to ask

Who are you? — *Ceelia*
Are you a woman? — *Yes*
Have you lived on earth? *No.*
Will you come to life? — *Yes*

When? *In six years.*
Why are you conversing with me? *Because I am Count.*

Mr A interpreted this answer as I (Cleia) feel

91 4TH DAY

Am I the one who asks questions? – *Yes.*
Is Cleia there? – *No.*
Who is here then? – *Nobody.*
Does Cleia exist at all? – *No.*
The world we were speaking yesterday? *Harmonyday*[37]

92 Janet conducted the following conversation with the subconscious of Lucie while meanwhile was engaged in conversation with another observer

[Janet asks: Do you hear me? Lucie answers in automatic writing:] *No*
But one has to hear in order to answer. *Absolutely*
Then how do you do it? – *I don't know.*
There must be someone who hears me. *Yes*
Who is it? – *Somebody besides Lucie*
All right. Somebody else. Still we give the other person a name. Will
You know more or less. *A vague Adrienne*
Well, Adrienne, do you hear me? *Yes*[38]

93 One can see from these extracts how the unconscious personality builds itself up. Janet's excessively suggestive questions would elicit an answering echo in the dreamer's own disposition. This disposition can be explained by the dissociation of psychic complexes. The feeling of strangeness evoked by these abnormal states assists the process as soon as the subject's attention is directed to the automatic act. Bruet remarks on this experiment of Janet's: "Nevertheless it should be carefully noted that all the personality of Adrienne could be reached. It was because the suggestion evoked a new *ego* [*moi*]; in other words a dissociated psychic personality were existing there apart from the normal consciousness of the subject."[39] The undervaluation of the subconscious is always a great step forward and has enormous significance

[37] Myers, "Automatic Writing" (1885).
[38] *L'Automatisme*, pp. 317–18.
[39] Bruet, p. 247.

regarded in this light.

or the other arm will not work.

service.

in a few cases the suggestion is realized despite its comparative boldness as it is directed to the waking consciousness of a so-called normal person[1] but even then only in a peculiar way by putting only the pure motor part of the central nervous system under hypnosis and that the deeper hypnosis is then obtained from the more phenomenal by a new suggestion, as in the procedure for table turning described above. The subject holding a pencil in his hand is purposely engaged in conversation or his attention from writing. The hand therefore starts to move, making a number of strokes and zigzag lines at first or else a simple one

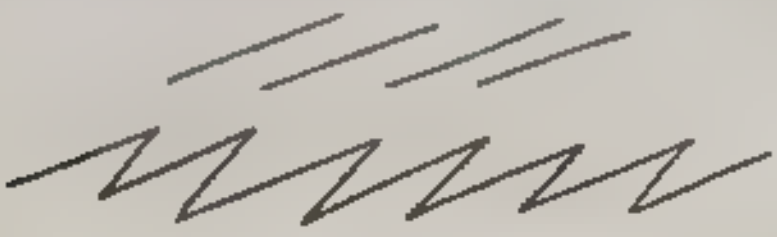


Figure 4

[illegible] sometimes happens that one [illegible] does not [illegible] the [illegible] [illegible] [illegible] These [illegible] [illegible] must be regarded as [illegible] [illegible] corresponding to the ex[illegible] [illegible] [illegible] writing. They are sometimes [illegible] [illegible] are written right off [illegible] [illegible] said above [illegible] [illegible] true here of their [illegible] [illegible] words and sentences. Now and then one [illegible] writing is [illegible] [illegible] [illegible] cases, and perhaps in [illegible] experiments with beginners one [illegible] [illegible] under such special [illegible] [illegible] [illegible] [illegible] [illegible] subject. Occasionally its character may be [illegible] [illegible] but it is [illegible] [illegible] and is always a symptom of the existence of a subconscious personality. As already said, automatic writing [illegible] [illegible] patients never came to very much. [illegible] experiments were carried out with the table and in these cases I succeeded [illegible] [illegible] to see some symbols or even [illegible] but [illegible] writing and [illegible] the same result as the [illegible] [illegible] table [illegible] [illegible]

[illegible] HALLUCINATIONS. [illegible] [illegible] [illegible] [illegible] to somnam[illegible]

[illegible] [illegible] experiments [illegible] [illegible] [illegible] [illegible] [illegible]

[redacted]

[a] *Alterations* pp

[b] *The Interpretation of Dreams* (orig. 1900)

might be possible to see this spirit

choice of the visual

stance very unmusical.

nations, for we were talking all the time.

appearance of ha[illegible]ocinations.

[48] *India to Mars*, p. 59

[47] *Handbuch der Geisteskrankheiten* [illegible]76), p. 134

Theorie der Hallucination" (1868), p. 41

Sommeil et les rêves (1861), p. 154
...logy of Visual Dreams" (1892)

of the visual organ stimulated from within."

his report

throughout the whole séance.

rounded by extraordinary flowers. [86]

[84] Hagen (1868), p. 57
[85] *Life of Celtis* (trans. by Symonds), pp. 63 f.
[86] Hagen (1868), p. 57
[87] Flournoy, *India to Mars*, pp. 306 ff. (trans. modified)
[88] Ibid., p. 170

Mikailo[50] distinguished between creative hallucinations in children as being conscious saving that these occur in persons of lively mental energy, understanding and high nervous excitability. Hecker expresses himself in a similar manner but even more emphatically. He supposes hearing to be the [illegible] with consciousness of the psychic organ which brings spontaneously into consciousness the images from memory and imagination.[51] These hallucinations are [illegible] of the highest spiritual power. A visionary is a man of higher endowment who, today as in past times, [illegible] perfect reality and the ideal. Certain hallucinations [illegible] making statements about [illegible] and [illegible] working of the subconscious psychic [illegible] of the [illegible] Flournoy, for example, was [illegible] of the [illegible] Hélène Smith.[52] In our case the vision is [illegible] by a seeing state whose peculiarities we will discuss below.

The Change in Character

[illegible] state [illegible] change in character. There are several cases [illegible] literature where [illegible] character of [illegible] Mrs. Piper [illegible] Miss Wh. [illegible] Pelman [illegible] Miss A. [illegible] of the [illegible] she [illegible] the [illegible] she spoke [illegible] Miss [illegible] Instead of being [illegible] was [illegible] Instead [illegible] was [illegible]

[illegible]

[50] *Über Visionen* pp. 286ff.

[51] Flournoy, p. 52.

[52] [illegible] (1899), pp. 399ff.

changed.' [65]

in the second state

completely separated by amnesia.[66]

Allg Z f Psych XXII (1865), 405–7

XXXII (1890), 335

[66] "Ein Fall von spontan Somnambulismus" (1893)

[67] *Hypnotisme* (1887) pp. 63ff.

the second state

88 *Variations de la personnalité* (1888)

89 See [illegible] (1893), pp. 506ff

90 *Der Hypnotismus* (1884), pp. 109ff

91 *L'Automatisme psychologique*

92 "An Experimental Study of Visions" (1898)

93 Quoted in Ribot *Die Persönlichkeit* (1894).

character at puberty

the ego,[74]

[74] Ribot, p. 69.

moving their lips, etc

Ibid., pp. 9f.

[illegible] *pathologische Lüge* (1891). [A reference in [illegible] two *Essays on Analytical Psychology* (Vol. 7 of the *Coll. Works*), p. 154, to th[illegible] par[illegible] is in error instead see part. 1911. EDITORS.]

[illegible] *Hysterium* (trig. 1889).

[illegible] "Über pathologische Trä[illegible]

[illegible]

[illegible]

[illegible]

jectivation of the dream.[88]

logical dreaming.

88 As, for instance, in the roof climbing of somnambulists

ständs (1901), pp. 54–59

p. 285

object, depends largely upon memory."

a be[illegible] to the origin of such dreams: many times when [illegible] themselves with the words preserving an consciousness sunk below the [illegible] associated chains of thought get [illegible] and it comes to pass that [illegible] on working on the [illegible] We must [illegible] to express again in the genesis of [illegible] dreams.[90] [illegible] sudden and unexpected [illegible] of [illegible] in this way. [illegible] states [illegible] case was personality in the second note as also [illegible] direct cause [illegible] development of simultaneous automatisms.

A second [illegible] may also occasionally [illegible] division. From [illegible] stress. [illegible] alteration [illegible] by [illegible] as rather a personal and [illegible] by the [illegible] later on [illegible] engaged by. The [illegible] state [illegible] that the mind is absorbed to [illegible] other things and [illegible] such a degree that [illegible] the way required for [illegible] actions and these actions, being [illegible] case as in the preceding case, may assume a psychic [illegible] genetic, a parasitic kind, existing side by side with the normal personality which is not aware of them.[91]

220 Our patient's [illegible] throw a most significant light on the [illegible] of her dreams. They swarm with [illegible] and secret [illegible] with [illegible] terms and other sexual [illegible]. The habit of all these [illegible] stories is already [illegible] and we [illegible] by turns in the [illegible] of the [illegible] and [illegible] of the [illegible] is a sink of [illegible]. But the [illegible] remains even [illegible] in which [illegible] appears as [illegible] number of [illegible] heroes [illegible] an

[illegible]

91 Binet, *Alterations*, pp. 95f., modified

exceptional as they were, is so very characteristic of the whole puberty period. It is the woman's predominant sexual feeling that dreams of her having intercourse with these strange ideas in the subject. We shall be on the wrong track if we seek the main cause of this illness at the present time in her being sexually frustrated. From this point of view the successful Ivettes and Germaines hardly ever dream of a dream of sexual wishfulness, and it is true for the dreams of a night only and not those spread over months and years.

[*Nature of the Somnambulistic Attacks*]

So far there is not much in Miss W.'s story that has not been discussed and illustrated by the records of her attacks. But there remains the question why she was suddenly seized with a desire to get rid of her wardrobe, and why she was accompanied by various hallucinations. According to her own statement she was under the distinct stress of fear. Judging from the external symptoms and course of these attacks, one is inclined to think of narcoleptic epileptiform attacks. Such disorders, for instance as I have described in Lucie Fr. are quite possible since we know that one member of her family had epileptic attacks of a similar kind. It is also not at all unlikely that her parents interested her pleasantly in spiritualistic seances. One often observes hysterical fits of this kind in spiritualistic seances. Our patient never showed any symptoms of convulsions but instead she had those peculiar somnambulistic attacks. Accordingly two elements must be considered for the first attack.

(1) The influence of hypnosis.
(2) Psychic excitation.

The Influence of Partial Hypnosis. Janet observed that certain states of distraction have a hypnotic influence and can easily be developed into somnambulistic attacks. I have described a typical example of this kind. We have patients who were frightened by ghosts, but others who had a strong desire to see them. Janet studied very

[1] *Archives de psychologie*, page 9[illegible]. Another investigation on somnambulistic attacks by [illegible] was published in the same volume. Such attacks are described as having a kind of hypnotic origin and are characterized by the very same mental disease [illegible] somnambulism.

[illegible] and her arms in a kind of [illegible] suggestive manner, but unconsciously. Her eyes were [illegible] questions by signs. Suddenly she broke off the conversation, turned round, and was [illegible] conscious. Immediately she was [illegible] talk with [illegible]. She had fallen into hypnotic somnambulism.[93] In this example we see a process which in [illegible] case does not certain reasons to be discussed later [illegible] sleeping state cannot be regarded as hypnotic. We therefore come to the question of

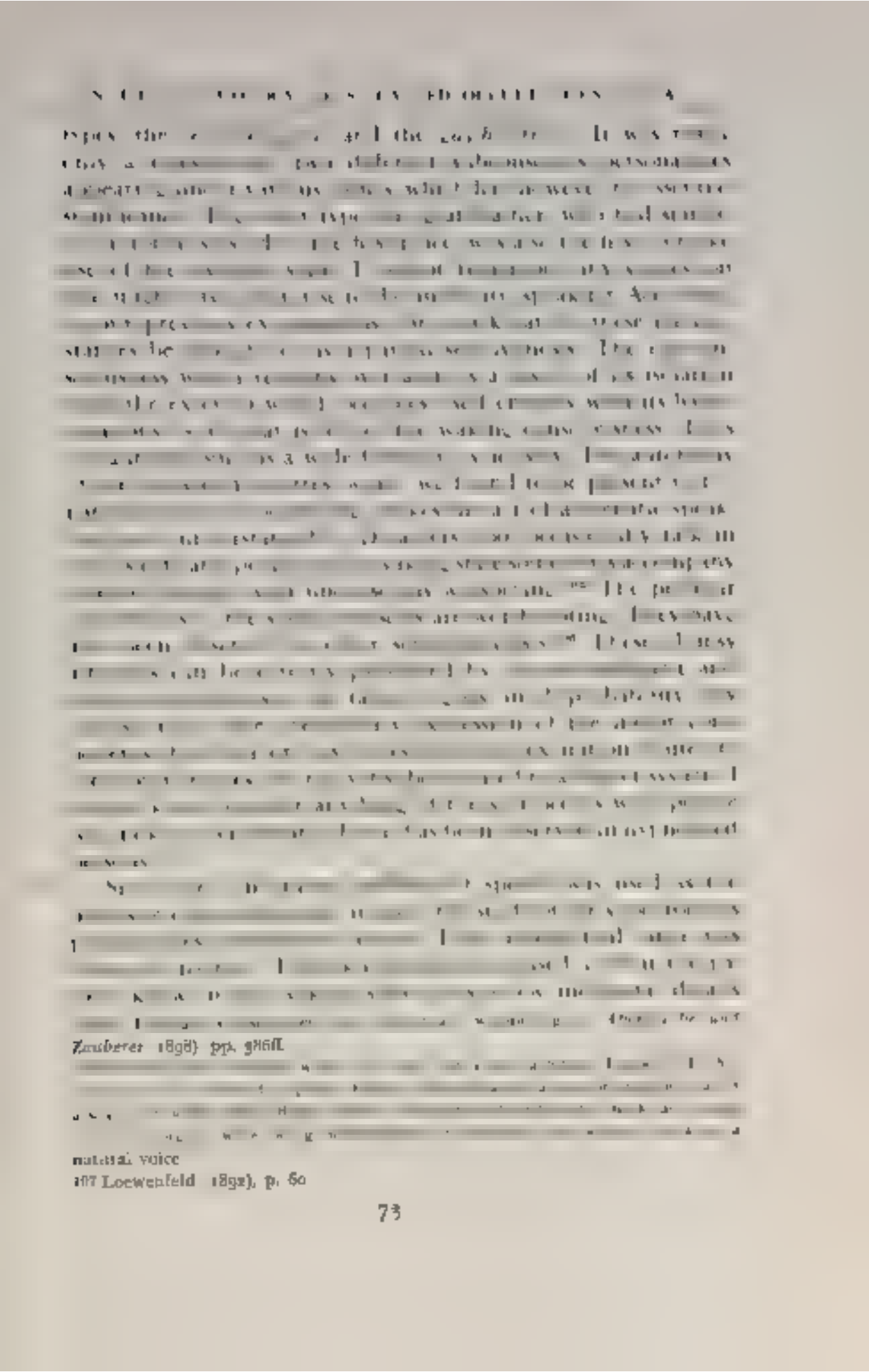
29 [illegible] Psychic Investigation [illegible] Bertha Richter [illegible] Countess [illegible] case [illegible].[94] Especially in the most extreme [illegible] somnambulic [illegible] as well known [illegible] in the arms of [illegible].[95]

31 With somnambulic [illegible] [illegible] [illegible] and [illegible] to [illegible] [illegible] [illegible]. For example a [illegible] have [illegible] [illegible] [illegible] [illegible]. When [illegible] knife [illegible] she suddenly saw [illegible] [illegible] [illegible]

by these attacks.

[126]

[68] Loewenfeld (1894), p. 737
[69] Ibid., p. 737
[69a] Loewenfeld (1904), pp. 59ff



Zauberer 1899) pp. 9ff.ff.

material voice
in Loewenfeld 1892), p. 60

observer. Cf. Flournoy, pp. 49of

[illegible]

[illegible]

[illegible]

[illegible]

personality [illegible] our consciousness to great [illegible] the pro-
[illegible] and [illegible] elevated by disturbance caused by the hysterical attack.[2] This process is a more complete switch by [illegible] associations [illegible] have as it were [illegible] most and most [illegible] property of the subject's consciousness personality. The stream [illegible] lives as it emerges in consciousness is put into the mouths of the figures who have been taken out of us and dressed with the remains associated with these persons.

[Origin of the Unconscious Personalities]

[illegible] As we have seen, the various personalities are grouped round two types, the gnome and Ivenes von Gertrastein. The [illegible] gnomes [illegible] are [illegible] and [illegible] and [illegible] Ivenes von Gertrastein [illegible] simply a [illegible] with [illegible] [illegible] [illegible]

[illegible] milder form predominates.

Course of the Disorder

[illegible]

phenomenon.

156

del Irreismo" (1864), p. 7
116 Jessen, "Doppeltes Bewusstsein" (1865), p. 407
117 Flournoy, p. 91

Hysterical Paralysis of Left Arm

[illegible] We have now discussed all the essential paranoia pre[illegible]

[illegible] Dessoir's [illegible]

[illegible] We [illegible] justice to all sides of our case

[illegible]

[illegible]

ego-complex in question.

39 [illegible]

[illegible]

[illegible]

[

[illegible]

140 Nietzsche *Also Sprach Zarathustra* [illegible] *Thus Spoke Zarathustra* [1]

[illegible] The first [illegible] Thus Spoke Zarathustra [illegible] Nietzsche [illegible] Zarathustra [illegible] never had any choice in the matter [illegible] 886.)

[illegible]

[Cf par 181 below.—Editors.]

he struck rocks to starboard, and the crew were ashore to shoot rabbits. About the noon hour, however, when the captain and his men were gathered together, they suddenly saw a figure coming towards them through the air. As it came said distinctly (the voice I suppose was borne by the wind) but when the figure drew close to the ship, passed quickly like a shadow to the westward, and they recognized the greatest as may that it was Zarathustra.

"Behold," said the old helmsman, "Zarathustra goes down to hell."

they mastered the crew to go aboard when to their inexpressible astonishment they saw two men flying rapidly towards them through the air. One was dressed in black the other in grey. They came past them very closely in the greatest haste and to their utmost dismay descended and disappeared in the burning flames into the crater of the terrible volcano, Mount Stromboli. They recognized the pair as acquaintances from London.

Nietzsche's sister Elisabeth Förster-Nietzsche, told me, in reply to my enquiry, that Nietzsche had taken a lively interest in Pastor Oehler while still a boy. His grandfather Pastor Oehler, in Pobles, between the ages of 3 and 15, but certainly not later. It could scarcely have been Nietzsche's intention to commit a plagiarism from a ship's log. Had this been the case he would surely have omitted that extremely prosaic and family reference passage about shooting rabbits. Obviously when painting the picture of Zarathustra's descent into hell, that forgotten impression from early youth must have cropped up, or wholly unconsciously into his mind.

This example shows all the peculiarities of cryptomnesia in a quite unimportant detail where it may deserves to be forgotten as quickly as possible suddenly reproduced with a most literal fidelity. What the main point of the story is one cannot say with certainty. But it created a certain impression and was thus remembered. Any individual experience that one has to tell is there described as precisely as possible in details that would be forgotten in dreams or in a state of distraction. The story tells so absolutely that even young Nietzsche as a very keen reader probably skimmed through it without giving any very particular interest to the matter. Even if he recognized the associative connections

will appear more understandable

in such an excess of light." Cf. Ludovici trans., p. 102.]

124 Eckermann, *Conversations with Goethe* p. 387

125 Cf. Görres, *Die christliche Mystik*

127 Zündel, *Pfarrer J. C. Blumhardt* (1880)

128 *From India to the Planet Mars.*

[illegible]

[illegible]

[illegible]

the number 18 [par 98]

there is an actual increase of function.[101]

but with non-somnambulists as well

[100] Ibid., p. 405

[101] Zschokke, *Eine Selbstschau* (1845), pp. 297ff

[illegible] This knowledge seems to [illegible] several different ways. The first thing [illegible] as we have said, is the [illegible] of the [illegible] psychic [illegible] secondly, we must emphasize the importance [illegible] which proved to be [illegible] suggestibility of [illegible] and [illegible] thirdly, the [illegible] these points every [illegible] [illegible] the [illegible] was [illegible] suggestion [illegible] the person of the [illegible] observer with the [illegible] [illegible] of [illegible] the [illegible] Frau Professor Kr[illegible] [illegible] examined this [illegible] [illegible] [illegible] [illegible] called [illegible] [illegible] Rupert for [illegible] might [illegible] [illegible] [illegible] [illegible]

[4. Conclusion]

199 This exhausts my knowledge of the sources used by the patient. Where the rest of her ideas came from she was unable to say. Naturally I waded through the occult literature so far as it pertained to her subject and discovered a wealth of parallels with the most diverse systems, dating from different centuries, but scattered about in all kinds of works, most of them quite inaccessible to the patient. Moreover, at her tender age and in her surroundings, the possibility of any such study must be ruled out of account. A brief survey of the system in the light of the patient's own explanations will show how much intelligence was expended on its construction. How high the intellectual achievement is to be rated must remain a matter of taste. At all events, considering the youth and mentality of the patient it must be regarded as something quite out of the ordinary.

200 In conclusion, I would like to express my warmest thanks to my revered teacher, Professor Bleuler, for his friendly encouragement and the loan of books, and to my friend Dr. Ludwig von Muralt for his kindness in handing over to me the first case mentioned in this book (case of Miss F.

ON HYSTERICAL MISREADING

151 In his review of my paper 'On the Psychology and Pathology of So-called Occult Phenomena'[2] Mr Hahn misrepresented my views on hysterical misreading. Since I regard this phenomenon as being of fundamental importance, perhaps I may be allowed to state my views once again.

52 My patient misread with remarkable frequency and always in a quite definite way: each time she substituted the Swiss dialect word for the word in question, so instead of saying 'Treppe' (stairs) she said 'Siege', and instead of 'Ziege' (goat) she said 'Geiss', and so on.[3] These expressions are absolutely synonymous. Hence, if the word 'Siege' is produced it proves that the meaning of the word 'Treppe' was understood. There are two possible ways of explaining this phenomenon:

153 (1) The word 'Treppe' is understood correctly and consciously. In this case there is also utterly no reason for a healthy person to reproduce the word incorrectly, i.e. as a dialect word. He will say with my patient the dialect word 'Siege' to 'Treppe'.

54 (2) The word 'Treppe' is not understood correctly. In this case any normal person will reproduce no sense [i.e. neither

[1] First published as 'Über hysterisches Verlesen'. *Archiv für die gesamte Psychologie* (Leipzig), III (1904), 4, 347–50.—EDITORS.]

[2] [See the previous paper in this volume. The review by R. Hahn was published in the *Archiv*, III, Literaturbericht, p. 28.—EDITORS.]

[3] [Cf. pars. 58 and 73, above.]

under conditions of distraction

a black ground

reproduces them in modified form

[4] [Cf. par. 75, above.]

II

CRYPTOMNESIA

reacting by other ideas, but the act continues automatically and forms a state of consciousness complex on its own, which likewise understands correctly but represents in modified form

164 The type of process is therefore the same, for which reason my reference to Binet's experiments is fully justified. It is a type that repeats itself over the whole field of hysteria, for instance, the systematic 'irrelevant answers' of hysterical subjects, which have only recently been publicized, would also come into this category

165 For the rest, I would like to point out that the main emphasis of my paper lies on the fullest possible registration and analysis of the manifold psychological phenomena which are all intimately connected with the development of character at this time of life. The analysis of the clinical picture is not, as Mr Hahn thinks, based on French writers, but on Freud's investigations in hysteria. Mr Hahn would like to see the analysis 'carried further and pursued more rigorously'. I would be very much obliged to Mr Hahn if, together with his criticism, he would specify new ways of investigating this very difficult field.

CRYPTOMNESIA[1]

66 Modern scientific psychology distinguishes between direct and indirect memory. You have a direct memory when for instance you see a certain house and it then comes into your mind that you formerly years lived there some years ago. You see the well known house and by the law of association the coexistent memory image of your friend enters your consciousness. An indirect memory is different. I walk deep in thought past the house where my friend X used to live. I pay no attention whatever to the house or to the street but am occupied with some urgent business matter. I have no attention to spare. Suddenly an unexpected image flashes across my consciousness between my thoughts. I see a scene in which X once I discussed similar matters with me many years ago. I am surprised that such a particular memory should come up for the conversation was of no importance. Suddenly I realize that I am in the street where my friend once lived. In this case the association of the memory image with the house is indirect. I did not perceive the house consciously for my thoughts distracted me from my surroundings too much. But the perception of the house evidently slipped into the dark background of consciousness and activated the association

[1] First published as *Kryptomnesie*, *Die Zukunft*, Berlin, 8th year, 1900, I, 325-34. Editor's

[2] I call unconscious in the widest sense everything that is not represented in consciousness, whether mislaid only or permanently

assistance from consciousness

fore.

tion to its momentary surroundings.

with hysterical persons

poses what he suffers.

perhaps already printed.

on what has gone before.

179 [illegible]

mesia

18 [illegible]

* *From India to the Planet Mars* (orig. 1900)

[illegible]

140f. above.]

[illegible] responding passage from Nietzsche

Nietzsche *Ecce Homo* Kerner *Reiseschatten von Prevorst*[8]

Now about the time that Zarathustra passed over the happy Isles it happens that a ship [illegible] at the isle on which the sepulchre of the [illegible] Over the [illegible] Now the boat [illegible] and [illegible] was a dark [illegible] and [illegible] But what [illegible] [illegible] like a shadow [illegible] [illegible] that it was Zarathustra. [illegible] and the old [illegible] Zarathustra [illegible] down [illegible]"

Nietzsche [illegible] [illegible] the gate of the underworld."]

The [illegible] hart Mr [illegible] [illegible] [illegible]

come to reproduce this passage?

before

184

which this work was produced.

* *Ecce Homo*, trans. by Ludovici, p. 108, modified

choice in the matter.[10]

meaningful structure.

10 Ibid., pp. 101f.

186 These psychical processes where [illegible] cross-wise [illegible] causes [illegible] reappear in [illegible] fragments [illegible] phonographic fidelity are what [illegible] cryptamnesia

186 In case of Jacobsohn what I know only from [illegible] of Harden and Schmitz does [illegible] to have much in common with cryptomnesia at any rate I cannot say why should not be so From [illegible] great perhaps, gravamen [illegible] seems about the strength of Jacobsohn's [illegible] has passed [illegible] Hardly as Schmitz ventures [illegible] acoustic sphere [illegible] and [illegible] alone inter a vocal [illegible] the specific [illegible] Systematic [illegible] lesion in Broca's convolution [illegible] and [illegible] regions of the brain bear little resemblance to cryptomnesia I am on the contrary inclined to give Jacobsohn a good prognosis, for the time being as regards his articular [illegible] from Should any further [illegible] be [illegible] hurt [illegible] would be the slightest [illegible] even if the cortex of [illegible] sensory [illegible] were actually [illegible]

Maximilian Harden [illegible] case of Siegfried Jacobsohn [illegible] in his weekly journal *Die Zukunft* [illegible] possible [illegible] that we had not done so knowingly and [illegible] suggestion [illegible] alcohol in [illegible] amnesia may have been [illegible] Some [illegible] these physical and psychological [illegible] we next [illegible] Jacobsohn followed [illegible]

III

ON MANIC MOOD DISORDER

ON MANIC MOOD DISORDER[1]

187 Under the term manic mood disorder I would like to publish a number of cases whose peculiarity consists in chronic hypomanic temperament. A constitutional mood disorder characterized by mirthfulness and irritability has been known for some time but only recently has attention been drawn to cases which while still belonging to the category of psychopathic inferiority are remarkable for their excessively sanguine temperament. So far as I know the relevant literature refers[2] was the first to publish a case of this kind. It offered clear indications of a manic state which as the anamnesis showed was chronic and could be followed back right to youth. The patient was 42 years old on his admission, and had suffered a severe head trauma at the age of nine. He was intelligent and a skilled worker. Later however, he led a vagabond's life was a deserter, thief, jail-breaker and harbored a criminal. He was arrogant in his behavior, tremendously active full of noble intentions and plans for world betterment showing flights of ideas and surprisingly little need for sleep.

188 In earlier writers we find many of the barest hints which might possibly refer to similar cases, as for instance in Pinel[3] whose

1 First published as "Über manische Verstimmung." *Allgemeine Zeitschrift für Psychiatrie und psychisch-gerichtliche Medizin*, Berlin, LX (1903), 425–49. [Editors.]

2 "Über chronische Manie" (1902), pp. 80 ff.

3 *A Treatise on Insanity* (orig. 1801), pp. 150ff.

able. He describes this state as follows

se presents in this state

Die Manie 1881

Ein Fall von sanguinischer Minderwerthigkeit", 1893

¶ Pub. 1891

and other moral defects.

fundamental manic symptoms.

July 22, 1901

transitoriness of affects.

2

mitted to a Swiss mental home

hölzL on October 19, 1895.

and her elated mood

ink as at its last gasp.

her copywork than before

here than in the first case

5

805 [illegible] able for her social instability

806 [illegible]

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OF THEOLOGY LIBRARY

scandal

debts everywhere.

former fiancé."

periods

4

Burghölzli on March 21, 1876

mind

exaggerations or vivid comparisons

2.8

syndromes of degeneracy

2.9

departments are at least average.

he will ever do.'

sought in the realm of affect.

psychologischer Grundlage" (1897)

28 *Grundriss der Psychiatrie* (1894) p. 390

motor symptoms, the flight of ideas, pressure of talk, mood of euphoria, etc.

[2 1] In surveying the literature on manic-depressive psychosis one is struck by the extraordinary and exceptional variety and scope of observation reported.[12] In general, perhaps, the most striking feature of investigations has been the relative attention given to the emotional disturbance, and to the relative neglect of the mental processes. In this way it might be possible to explain why so few of the symptoms which have been singled out for special study are common to the two phases, and to regard them rather as examples of a definite mental disorder in the sense of a relatively small number of primary symptoms. The greatest attention, along the lines suggested, would be claimed by the cases in which there is a rapid succession or even co-existence of depressive and maniacal excitations.

[224] To sum up

1. Manic-depressive insanity is a chronic condition that belongs to the so-called psychoneuroses, and is characterized by a stable symptom-complex of symptoms generally dating back to youth.

2. Exacerbations of short periodicity can be observed.

3. A considerable number of manic-depressive insanity cases have only one or a few attacks of mania or melancholia, and these cases symptomatically depend entirely on the hypomanic state.

[225] In conclusion I would like to thank my chief, Professor Bleuler, for kindly allowing me to make use of the above material.

[1] Kraepelin speaks also of periodic emotional insanity, but he includes in it only those cases in which the emotional reaction is of short duration, and in which the mental processes are not affected. Periodic insanity, as I understand it, is a disease in which the emotional reaction lasts for a considerable time, and in which the mental processes are also affected. Kraepelin's periodic insanity would be included in my cyclothymia. [2] Kraepelin speaks of periodic insanity as a disease which usually happens only once in the life of most patients, but which may have the same course as manic-depressive insanity.

IV

A CASE OF HYSTERICAL STUPOR IN A PRISONER IN DETENTION

A CASE OF HYSTERICAL STUPOR IN A PRISONER IN DETENTION*

296 The following case of hysterical stupor in a prisoner in detention was received to the Burgholzli Clinic for a medical opinion. Apart from the publications of Ganser and Raecke, the literature on cases of this kind is very scanty and even their contributions are inconclusive in view of Nissl's critical strictures.[1] It therefore seems to me of interest to put such a case on record, particularly as the special criminal procedure it presents is of considerable importance for the psychopathology of hysteria in general.

297 The patient Godwina F., was born May 10, 1864. Her parents were stated to have been healthy. Two of her sisters died of consumption and another died in a mental asylum. The fourth was normal. One brother was also normal and very capable. The second brother was Carl F., an habitual criminal. Her two illegitimate daughters were both healthy. Nothing was known of any previous mental illnesses. The patient came of poor circumstances; she began work in a factory at the age of 14. At 23 she married a wine-waiter, had her first legitimate child at 18, her second at 28. She was entirely dependent on her lover, who provided her regularly with money. She alleged that

* For proof read as: Ein Fall von hysterischem Stupor bei einem Untersuchungsgefangenen. *Zeitschrift für Psychologie und Neurologie*, Leipzig, 1902, 3, 1–6. — Editors.

[1] [See below, notes 3–5, for these citations.]

[illegible]

be ascertained

[illegible]

[illegible] longer recognized money

[illegible]

[illegible] hopeless.

[illegible] brisk, pharyngeal reflex present

[illegible]

did so in an impersonal way, not paying any attention to what I was doing, even when I intentionally administered the pricks quite openly, under her very eyes. *Rather, as if consciously denying the real situation she looked for some unknown cause of the pain in her nightgown or in the bedclothes.*

256 The following conversation then took place:

Where are you? — *In Munich.*
Where are you staying? *In a hotel.*
What time is it? — *I don't know.*
What's your name? *Don't know.*
Christian name? *Ida.* (This was the name of her second daughter.)
When were you born? — *I don't know.*
How long have you been here? *Don't know.*
Is your name Meier or Müller? *Ida Müller.*
Have you a daughter? — *No.*
Surely you have! — *Yes.*
Is she married? *Yes.*
Whom to? — *To a man.*
What is he? — *Don't know.*
Isn't he the director of a factory? *Yes, he is.* (Wrong answer.)
Do you know Godwina F.? *Yes, she is. Munich.*
Are you Godwina F.? *Yes.*
I thought your name was Ida Muller. *Yes, my name is Ida.*
Have you ever been to Zurich? *Never, but I've stopped with my son-in-law.*
Do you know Mr. Benz? (The son-in-law.) *Don't know Mr. Benz, never spoken with him.*
But you've stopped with him, haven't you? *Yes.*
Do you know Carl F.? Her brother? *Don't know him.*
Who am I? — *The headwaiter.*
What is this? (A notebook.) *The menu.*
Tell me the time. I showed her my watch, which said 1. — *One o'clock.*
What is three times four? *Two.*
How many fingers is this (?). *Three.*
No, look carefully! — *Seven.*
Count them. *1, 2, 3, 5, 7.*
Count up to 10. *1, 2, 3, 4, 5, 6, 7, 10, 12.*

257 She could not say the alphabet or do subtraction or multiplication. When she attempted to write extremely strong tremors ap-

peared she could not produce a single legible word with her right hand but managed a little better with her left She could read only with the utmost difficulty, and frequently misread the letters. With numbers it was even worse she could not distinguish between 3 and 5. She recognized objects held before her No symptoms of aphasia She proved very suggestible For instance she was told when standing over the bed in her nightgown that she had a pretty silk dressing gown Yes very pretty she said, stroking the nightgown with her hand and looking down at herself Then she wanted to sit down on the edge of the bed But you can't go to bed with your clothes on Solemnly she began unbuttoning her nightgown then stopped suddenly But I'm not wearing a nightgown."

248 *June 6* The patient's condition was about the same but she now knew her name was F though she still gave Ida as her first name She knew her age but was otherwise totally disoriented

239 *June 7*

How long have you been here? *A long time*
Twenty years? — *Yes, a very long time*
You've only been here a week haven't you? *Only a week?*
Where are you then? *In March Must I always keep telling you?*
Where are you staying? *In hospital There are lots of sick people here, but I'm not sick*
What's the matter with these sick people? *I realize*
Who am I? — *The doctor*
Have you seen me before? — *No.*
So today is the first time *No yesterday*
What day of the week is it? *Sunday* (Wrong answer)
Month? — *The second.*
Year? — *I don't know*
1894? — *Yes.*
No, it's 1896! *Yes, of course* (In an emphatic tone of voice) *No, it's 1896, of course it's 1896 I'm not muddled.*)
Were you in prison recently? *No I've never been in prison A man with a beard hit me*
Did that happen here? — *Yes*
Have you any debts? — *No*
Yes, you have! — *Well, I have a lot of money.*
Where from? — (No answer)

How much? *Quite a lot.*

to my daughter

How old are you? *Fifty*

What year were you born? *In May.*

What year were you born? — *I don't know.*

What's that mean?

Have you only one daughter? *Yes, only one*

But you have two daughters! — *Yes.*

know

very much distorted by the tremor

[illegible]

[illegible]

[illegible]

[illegible] shot up to the [illegible] a week. She said [illegible] took place on the last [illegible] it was [illegible] [illegible] [illegible]

[illegible] In the evening she [illegible] was put for a short time into hypnotic somnambulism by means of a few passes and closing [illegible] eyes. Under suggestion she drank water and ate [illegible] an orange. On being told that it was an apple she bit a pen-wiper and pronounced it very sour.

[illegible] On awaking next day she *felt quite dazed and for the moment* knew [illegible] *disappeared* where she was. She looked at the clock and was surprised at [illegible] how quickly the time had passed. She was taking a walk with a friend. The doctor [illegible] was approaching and we expected the moment when [illegible] a few paces behind her would spoil the whole [illegible] thing. The hypnotizing took place at the usual time in the evening. The details were as follows: *At the moment when the friend* [illegible] *was expected to appear* [illegible] she [illegible] became rigid. No memory of [illegible] the previous day. Unaltered despite repeated attempts.

[illegible] Deep sleep was suggested for the night. Soundness of sleep was marked by deepness of breathing. The pains in the head were much better after she was awakened at night. She slept uninterruptedly for eight hours.

[illegible] On the following days she was hypnotized regularly with good [illegible] results. She showed [illegible] no memory with the previous ones.

[illegible] *February 11th.* The patient was [illegible] told by suggestion that [illegible] to-day's hypnosis [illegible] would be more [illegible] deep and better. She [illegible] *was expected to appear for the moment when the friend* [illegible] *was expected to appear* [illegible] she [illegible] became rigid. The [illegible] hypnosis proved very [illegible] deep, so that [illegible] painful [illegible] stimuli were [illegible] not felt.

[illegible] *February 12th.* Today I was [illegible] able to [illegible] awaken the patient from deep hypnosis by a trick.

[illegible] The patient was told [illegible] that [illegible] she [illegible] would [illegible] be awakened [illegible] when the [illegible] clock struck [illegible] three.

Are you hypnotized now? – *Yes.*

Are you asleep? – *Yes.*

[illegible] Pressure [illegible] on the [illegible] eyelids [illegible] [illegible] *right, I'm not asleep.*

[illegible] Look [illegible] [illegible] [illegible] [illegible] I [illegible] opened my

Are you asleep now? – (No answer)

Are you asleep? (No answer)

mouth.

) *Yes.*

How did you get here? *I don't know.*

he's taking me to the asylum.

Then how do you get here? *In a cab.*

of the big fat man who beats me.

266

267

[illegible] the patient [illegible] upon her. After [illegible] she was restored but was [illegible] very [illegible] after she was examined by the doctor and gave the following information

[illegible] [illegible] yesterday evening, she [illegible] [illegible] [illegible]

[illegible] asylum was not realized.

473 The patient was discharged on July 25, under police escort
474 [illegible] August 8, 1902 she wrote from Paris [illegible]
[illegible] asylum. Ever since I left there [abroad] I've been
[illegible] when I wake up at night I don't know where I am and I
get the feeling that I can't [illegible] I have to jump up
and [illegible] until I know where I am again.

475 The patient wrote that she was [illegible] because
[illegible] cause of money.

*

476 [illegible] several interesting points [illegible]
[illegible]

[illegible] the patient suffered [illegible] a delirious
[illegible] after a short [illegible] passed [illegible]
[illegible] characterized by [illegible] of the senses [illegible]
[illegible] of [illegible] [illegible] [illegible]
[illegible] [illegible] [illegible] [illegible] and [illegible]
[illegible] [illegible] [illegible] [illegible] symptoms and [illegible]
ances of sensibility.

477 [illegible] a remarkable example of a hysterical
[illegible] transfer" [illegible] [illegible] account of
[illegible] [illegible] [illegible] [illegible] [illegible]
[illegible] [illegible] [illegible] [illegible] [illegible]
[illegible] [illegible] [illegible] [illegible] [illegible]

[illegible]

first publication

[illegible]

[illegible]

[illegible]

young hysterics.

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

nosis of our case

ness.

hence a recol ection of her real name

right idea

[illegible]

[illegible]

[illegible]

[illegible]

tails.

activity is little affected, if at all

[8] *L'Automatisme psychologique* (orig. 1889), p. 87

spot had been touched.

[1] *Studies on Hysteria* (Leipzig, 1895) p. 206

[illegible] hysterical illness [illegible] we leave out of account the [illegible] complex of hallucinations and delusions may be tested [illegible] basis of the material at present available as a [illegible] psychosis, [illegible] with few exceptions, the cases so far known have been observed only in prisoners.

In conclusion I would like to thank my friend Professor Bleuler for his kindness in referring this case to me.

V

ON SIMULATED INSANITY

A MEDICAL OPINION ON A CASE OF SIMULATED INSANITY

ON SIMULATED INSANITY[1]

[301] Several cases of simulation have recently been published by Bo te[illegible] who in the course of his article remarks that the question of simulation presents fewer difficulties in practice than it does in theory. I would not like to go all the way with this statement. As a matter of fact cases do occasionally come up for observation which are extremely confusing and create any amount of difficulty for the specialists who are asked to give a medical opinion. It is precisely from the practical side that the art of the diagnostician is sometimes taxed to the utmost. Generally speaking simulation is suspected much more frequently and unjustifiably than it should even in spite of this we have also had to reckon in cases in which the observers were unable to reach agreement. Today through our knowledge of the various clinical pictures of dementia praecox and hysteria we have advanced a step further and have also gained much more insight into the question of simulation though this is not to say that we have acquired greater certainty in regard to doubtful cases. We possess no infallible method of unmasking the simulator and are as dependent as ever on the subjective impression he makes on the observer. As Bonhoeffer points out, it is always a risky business to publish these cases at all for it requires

[1] First published as "Über Simulation von Geistesstörung," in *Zeitschrift für Psychotherapie und Neurologie*, Leipzig, 1st series, 5, 1812–20. EDITORS

[2] "Über einige Fälle von Simulation" (1903).

item which seems of importance.

504

4 Gross *Criminal Psychology* (orig. 1898)
5 *Die Psychologie des Verbrechens* 1884, p. 258
6 So far as I have seen in the records

lichen Äusserungen psychischer Zustände (1899), I, p. 18n.

[9] "Über pathologische Träumerei" (1896).

[10] Bohn, *Ein Fall von doppeltem Bewusstsein* (1898).

[11] [See the first paper in this volume, par. 116.—Editors.]

[redacted]

12 Hoche. *Handbuch der gerichtlichen Psychiatrie* 1901)

accurate catamnesis.

507

crockery thrown out of the window

[6] "Über Emotionslähmung" (1901).

[illegible]

1

[illegible]

produced the result shown in Table I

TABLE I*

Associations	May 6 1903	May 27 1903	Associations	May 6 1903	May 27 1903
Co-ordination, etc.	6.4	5.0			
Predicative relation	8.9	6.9	Inner	15.9	69.3
Causal dependence	0.0	0.0			
Coexistence	14.1	15.8	Outer	16.6	28.6
Identity	0.0	0.0			
Verbal reminiscence	2.5	12.8			
Word completion	0.0	0.0	Clang reactions	3.7	0.0
Clang	3.5	0.0			
Rhyme	1.2	0.0			
Indirect	0.0	0.0			
Meaningless †	64.1	5.0			
Perseveration ‡	15.3	0.0			
			Repetitions ¶	19.1	13.0
			Occurring 2 times	12.8	6.0
			Occurring 3 times	5.1	1.0
			Occurring 4 times	0.0	4.0
			Occurring 5 times	0.0	0.0
			Occurring 6 times	1.2	1.0
			Occurring 7 times	0.0	1.0

* The [illegible] were [illegible] different [illegible] each [illegible] *Meaningless* [illegible] [illegible] [illegible]

scribed in Case 1

III).

page 170, based on 300 associations.

disturbances of our mental defective.

Psychology of Demen ia Praecox." -Editors.]

TABLE II *

Associations	N	D	N	D	Associations	N	D	N	D
Co-ordination, etc.	15.5	4.0	13.5	19.0					
Predicate relations	25.5	19.0	9.5	2.0	Inner	42.5	23.0	46.	33.0
Causal dependence	1.5	0.0	1.5	2.0					
Coexistence	7.5	6.0	7.5	4.0					
Identity	6.0	5.0	5.0	6.0	Outer	58.5	65.0	49.5	46.0
Verbal reminiscence	45.0	54.0	37.0	26.0					
Word completion	0.5	8.0	2.0	5.0	Clang reactions	1.5	11.0	2.5	29.0
Clang	0.0	2.0	0.5	15.0					
Rhyme	1.0	1.0	0.0	9.0					
Indirect	1.5	1.0	1.5	2.0					
Meaningless	0.0	0.0	0.0	0.0					
Perseveration	1.0	2.0	1.5	1.0					

* The figures are percentages. N = normal. D = dissociated.

near to certain states of dementia. This may possibly be the reason for the feeble-mindedness heightened by emotionality observed in Case 2. The findings have thrown some light on Case 4, who unfortunately was not subjected to detailed psychological investigation. In Case 2, simulation was quite out of the question, and yet the patient's behaviour ran much the same course as that of the first. Is it not possible that when feeble-minded and degenerate individuals are placed in an asylum the unwonted excitement becomes associated with affects which are neutralised only gradually in accordance with the poor adaptability of defectives? So far as it is possible to suggest

TABLE III*

Associations	N	D		Associations	N	D	
		Metronome set for min				A per minute	
		60	100			60	
Co-ordination, etc.	89.0	20.0	20.0				
Predicate relation	16.0	12.0	5.0	Inner	46.5	32.0	36.0
Caus. dependence	1.5	0.0	0.0				
Coexistence	7.5	2.0	2.0				
Identity	6.0	0.0	9.0	Outer	33.5	36.0	36.0
Verbal reminiscence	20.0	34.0	32.0				
Word [illegible]	0.5	0.0	2.0	Clang reactions	7.5	32.0	26.0
Clang	5.0	20.0	14.0				
Rhyme	0.0	4.0	10.0				
Indirect	4.5	12.0	12.0				
Meaningless	1.0	0.0	10.0				
Perseveration	0.5	2.0	2.0				
				Not understood	1.0	0.0	1.0

* The figures are percentages. N = normal. D = distracted.

[illegible] later at a, I should say it is not so much a question of the defect is of a certain mental disposition so that under degenerate conditions will present abnormal obstacles in the way of [illegible] association between objects and new impressions, and thus produces a state of emotional perplexity and embarrassment.

318 How far this disposition or mental state affects in a faulty or abnormal way [illegible] is not easy to determine but according to the observations of Janet and others the influence is seen most clearly in

hysterical persons and that it produces a state of dissociation in which the will, attention and memory are paralyzed and all the higher psychic processes are spared. Hysterics are lazy, selfish, suggestible, overstrung, and always under the control of their instincts. Speaking of the effect of emotion on hysterical subjects Janet says:

Emotion has a decomposing action on the mind: it reduces its synthesis and makes it for the moment wretched. Extraordinarily depressive processes such as fear, sorrow, the mental systheses [sic] are attacked. To speak in a calmer way, as closer to that of the whole action of perception which synthesizes.[18]

19 I wish to link Janet's description of the influences which affects to all possible forms of psychopathic inferiority, he says, as earlier:

One of the marks of emotion is that it is accompanied by a decided lowering of the mental level. At such times not only is the synthesis destroyed, the reduction to automatisms [sic] is more noticeable than at other times, but precautions even to assure the most ordinary syntheses, the higher phenomena and powers, are the level of the most elementary phenomena. Under the influence of emotion memory, synthesis, attention, the acquisition of new memories are stopped, while those already established disappear at the same time as the feeling of anger or pleasure, really existing, dominates the field of consciousness. In place of these we observe automatic movements.[19]

They have a particularly deleterious effect on the memory:

but has dissociative power which belongs to emotion as never more clearly displayed than in its effect on memory. Thus disconnected from the whole as they are, emotional memories retain their vivacity and even acquire a sharpness and poignancy not possessed by memories already formed.[20]

This effect is of special importance for us, as it explains the existence of memory-traces of traumatic events which are

19 *L'Automatisme psychologique* (orig. 1889), p. 457.
19 *Les obsessions et la psychasthénie* (1903).
20 *Névroses et idées fixes* (1898), I, p. 144.

quake)

320

Sept. 1908)

evaluating the state we are discussing

[illegible]

3

[illegible] Here I [illegible] from several points of view

[illegible]

[illegible]

being a catatonic

[illegible]

[illegible]

[illegible]

lowing statement

3rd

last fall

the following effect.

at suicide

[illegible] normal but a decided improvement [illegible] No improvement in retention but [illegible] work curve showed a change for the better

For the sake of clearness I give the results of the first and second tests side by side

TABLE IV

	June 10	*June 19*
Average performance per minute	28.1	30.4
Average per minute for first half	27.4	31.9
Average per minute for second half	28.9	31.9
Error in total number of additions	1.2%	4.0%
Errors per minute for first half	1.5	2.1
Errors per minute for second half	4.7	4.5

[illegible] The result of the second test shows a slight increase of 4.4 per cent in performance per minute as compared with the first series and a decided increase in the number of errors. The result may be taken as a confirmation of our observations in so far as [illegible] The patient's energy and attention did not [illegible] work. In short, rather he was [illegible] tests. On [illegible] made an essential part of his [illegible] through the skein of [illegible] letters [illegible] the Mosaic [illegible] dash resistance to being bandaged

[illegible] It would [illegible] the patient must be assumed [illegible] and more persistent but [illegible]

[illegible] I [illegible] patient really did simulate. We [illegible] a [illegible] possibility [illegible] of the [illegible] mentioned by Gamser. [illegible] of the fact that [illegible] a [illegible] deep [illegible] was made [illegible] was a [illegible] there was [illegible] after the

week.

Laurent, *Étude sur la simulation* (1860)

activity. "Über psychische Untersuchungsmethoden" (1896)

tion in states of distractibility.

28 *Alterations of Personality* (orig. 1892)

29 *L'Automatisme psychologique*

polite and ceremonious farewell

hensive stupor

[30] "Simulation von Geistesstörung" (1892)
[31] "Ein Simulant vor Gericht" (1884)

and dumb until his death.

346

347

existence for three years.

...ad suffered, denied he was insane.

...ulsion von Seelenstörung" 1883) p. 43

servations of a general nature

[86] "Über hysterische Dämmerzustände" (1903)

[87] "Über das Ganser'sche Symptom" 1903)

Errors.

[illegible]

553 [illegible]

[illegible]

[illegible]

[

When Sabina S. fixed upon me she was not a simulant. If by this term we mean a person who is genuinely psychopathic and whose actions are intended to conceal his mental weakness, whereas the abnormal actions of Sabina S. were precisely what revealed her inner morbidity. The same may hold true of many hysterics who do not, even though they may be psychopathic, simulate in the objective sense. Whenever hysteria is involved, the term simulation should be used with caution in order to avoid misunderstandings.

354 I would like to summarize the results of my work in the form of the following conclusions:

1. There are people in whom the after-effect of violent emotions shows itself in the form of a lasting confusion which one could best describe as emotional stupidity.

2. Affects, by acting specifically upon the attention, favour the appearance of psychic impressions in the widest sense.

3. Very many cases of simulation are probably due to the after-effect of violent emotions and their automatization, so that these psychoses and neuroses are to be termed psychological.

4. Conscious complexes in prisoners can probably be explained in the same way and are to be regarded as an automatized symptom closely related to simulation.

355 In conclusion I would like to thank my chief, Professor Bleuler, for his kindness in allowing me to make use of the above material.

A MEDICAL OPINION ON A CASE OF SIMULATED INSANITY.

356 Simulation of insan[illegible] general a rat[illegible]er rare phe[illegible]
non being confined [illegible]n most en[illegible]ery p[illegible]pers[illegible]n de[illegible]en[illegible]
and [illegible]n[illegible]victs. For the ord[illegible]ry pu[illegible]l[illegible]c the[illegible]ear of the [illegible]narr[illegible]
ass[illegible]ur[illegible]s too great and t[illegible]s particular [illegible]rm of sim[illegible]dat[illegible]n, or
inc[illegible]ntive[illegible]ent for it to be wor[illegible]th[illegible]en w[illegible]le to seek [illegible]r[illegible]
vantages [illegible]n this way. The sort of peop[illegible]e w[illegible]o take to s[illegible]mulation
have been found by experience to [illegible]e [illegible]n prese[illegible]t for the most part
of [illegible]ed[illegible]ividuals w[illegible]o show unm[illegible]stak[illegible]able signs of mental and phys-
ical degeneracy. Experience shows, therefore, that simu[illegible]n
generally rests on a pathological foundation. This [illegible]ct ex[illegible]ns
why the recog[illegible]t[illegible]on of simulated insanity is one of the most dif-
ficult tasks of the diagnostic art. If the simulation is recognized
and proved, it immediately raises the question of soundness or
unsoundness of mind, and the answer to this is beset with [illegible]al
kinds of difficulties.

357 Apart from cases of exaggeration of real or imaginary symp-
toms, we also find a number of people of mental states in de-
generate subjects whose cause may be traced back to the powe[illegible]
[illegible] affect produced by [illegible]e earth[illegible]y [illegible]nd [illegible]ch[illegible]l[illegible]ve enjoyment.
Even among [illegible]ed[illegible]ividuals and [illegible] [illegible]se capacity to assim-
late strong affects is [illegible]n[illegible]e[illegible]se[illegible]d, [illegible]n[illegible]du[illegible]y depressed

[illegible] [illegible]s published as a [illegible]ch[illegible]ter in the [illegible]n[illegible]al [illegible]e[illegible]e[illegible]s [illegible]f
[illegible]ppenheim's [illegible]e[illegible]tschr[illegible]ft [illegible]ür [illegible]ychiatrie und [illegible]eurologie, Wien, Bd. XVI, [illegible]
55-75. [illegible]dings.

REPORT

9.9 W[illegible]

1 Is the respondent mentally ill?

[illegible]

[illegible]

1. *Previous History*

[illegible]

[illegible]

the night and escaped.

964 childless and not very happy

965

November 22, 1902.

565 at 45 francs and the rest in cash

566

567

2. *Observations Made in the Asylum*

568

not appear to [illegible] as to [illegible] and could not state the year he was born. He persistently gave 5 fingers held before him as 4 to use. He could not tell the time said 5 to 5 30 4 to 6 30. and when shown a 3 30 said also 4 to He recognized only [illegible] pieces of bank pieces he called 20 cents. On being given a key and asked to lock the door he put the key in upside down. He tried to open a matchbox sideways. He was then put to bed. During the night he was quiet, but moved his bed once remarking that the plaster rose on the ceiling would fall on top of him.

959 At the examination on the morning he gave scanty answers had to be continually pressed. He seemed unclear about time and place said he was in a hospital in Zurich. He evidently understood all the questions quite well but gave senseless answers. [illegible] were confined to the [illegible] words.

970 Examples:

What is the name of this hospital? *Zurich Hospital*
What sort of people are in your room? *Sick people*
What is their matter with them? *They can't walk*
Are they wrong in the head? *No, in the legs*
How long have you been here? *Two days*
What day is it? — *Saturday*
What day did you arrive? — *Wednesday.*
What day is it? *Thursday*
What day was it last Saturday? *Thursday*
What day is it? *Sunday*
What day was it last Sunday? *When I was [illegible] in Zurich I heard singing*
Where were you last Sunday? *In Zurich*
What did you do? *Nothing*
Where do you live? — (No answer)
Glarus? Wauwau? — *Glarus*
What are you? *Bricklayer* *Zurich*
What did you do in Zurich? Did you go anywhere? *I wandered around*

3 1 Respondent gave no more answers, despite energetic pressing. He was [illegible] to do arithmetic sums and it was noted that he understood the requests correctly as proved by the gestures but carried them out in a deliberately senseless manner.

He was asked to write a letter. He took the pen in his left hand and wrote with it.

He was asked to read. He held the book up to his own eyes to read it. He was given a card on which was written "Close your eyes" and was told to do what was written on it. He read it and closed his eyes.

Said spontaneously: "I can't read."

He was told to read the book properly. He turned over the pages. The book was then held correctly. He was asked: "What is your name?" Reply: "What are you?" "Why are you here?" He could not be made to read.

He was asked to lock the door with a key. He named the key to the right to lock, to turn it, and then both times with a sudden show of strength. No. Lock remained locked.

He was asked to open the box. He held the wrong vessel (a tray) to receive the objects from the box. He then opened the box correctly, properly struck a match, and lighted a candle and put it out, both correctly.

He was asked to open the bottle and to draw the cork. He took the corkscrew.

He was asked to open a case of instruments. He opened the case. Spontaneous remark: "I don't know what they are." He took the spectacles from the case, very slowly began to open them correctly, and then suddenly turned them upside down.

He was given a purse with a penny in it. Remark: "It's a Press." When asked for the penny he pulled it off the clasp.

Some money (5 francs) was put on the table before him. Question: "How much is that?" "5 francs."

He was told to go to the door and asked how much was that worth? "Nothing."

Physical examination showed [illegible] and patellar reflexes.

Sensation to pain seemed to be generally reduced in places almost to extinction. Pupils reacted to pain somewhat more than to light and with a normal reaction. Face never asymmetrical. Left eyebrow sometimes higher than right. Badly sustained clonus of left leg. On the left side of the head over the scalp and [illegible]

by the alleged attempt at suicide).

upon he calmed down at once

feeding, then it would go better

where he delivered the following orati

away with it. He knew he would be taken to Bungarth, he thought it would be better to commit suicide.

595 In this way he arrived at the decision of pretending to be mad. He knew that anything because he thought he would starve himself. Another reason he had for this appearance. He was quite determined that it was not a case where he could open a door to see the only reason why he had not killed himself was that he thought it would bring more disgrace on his mother by committing suicide.

596 He said he had a fear of poisoning because it gave him an excuse for not eating. He said he was because he knew that people often saw things. When he was moved he was afraid to start eating as soon as he saw the doctor coming. During this recital he repeatedly burst into tears and was obviously in a very penitent mood.

597 On the following day he was subjected to a thorough examination.

598 Papers, patients and other relevant showed no change. When questioned as to the responsible for many things, he was quite sensible in general was considered in a manner over the future stated he was confused. He showed no resentment but he was quite typical religious mania. Upon was questioned as to his conduct he replied very slowly and he was quite long before he answered. When he was asked if he was mad he said he was not. He stood the examination properly. He was very cautious.

599 At first he was quite willing to read an article. This was soon was a considerable amount of hesitation. He took the sheet and read. He carried on reading for a while. Then the letters became blurred. He said he could not Do not make yourself ill, you are.

600 His retention was poor. He could not, was particularly apparent in working as to the number of the letter. He could not remember 147 + 17. He could not say 17 +

vague urge for freedom.

the following effect

401 He knew quite well how to [illegible] the examination we talked about. Those are the most important questions. It seemed to me that the [illegible] examination to which he had just given serious attention. I [illegible] could not have done any steps in the test we were going to [illegible] at the end of every [illegible] we took him to the [illegible] and brought him back to the room. [illegible] not to be [illegible] expected. What we saw was that all the beds were occupied, that was why we returned. Nothing [illegible] door. We [illegible] the [illegible] and left [illegible] over. Once we [illegible] bed [illegible] there was a bed [illegible] that it was [illegible] and that he was in the right room.

402 [illegible] had been [illegible] against the [illegible] for [illegible] was to be examined [illegible] to his [illegible] was [illegible] a state [illegible] daily care [illegible] his head.

403 Reverend [illegible] would not [illegible] suicide [illegible] replied in the [illegible] he said [illegible] he [illegible] very [illegible] exciting about [illegible] a reason [illegible] and got well and [illegible] he had no intention of committing suicide.)

404 In [illegible] the [illegible] was [illegible] as his work [illegible]. We [illegible] the [illegible] for [illegible] minutes [illegible] to [illegible] [illegible] [illegible]

[illegible] off and on [illegible] work [illegible] [illegible] about the warders [illegible] as he was told what there was to do, whenever the latter will [illegible] at patients here, etc.

406 On June 10 he was subjected to a further thorough examination.

407 His physical condition showed no change.

408 In his conversation there was [illegible] improvement for although his perception was still [illegible] and not quick enough it was quicker and more accurate than before.

409 No change. He demonstrated [illegible] on March 9 and calculation were just as inaccurate as on June 9.

410 On the whole the work we have taken on June 17 showed a distinct improvement. Not only was the average performance higher there was also a considerable drop in the number of errors.

411 Restraident now exhibited a continual mood of [illegible] depression and often asked when he could go away.

412 On June 23 he suddenly made an attempt at suicide by slowly sawing through the skin of his left wrist with a sharp stone from the area. On being charged to bleed he asked for water for a drink because he meant to shed [illegible] tears in response to this case the attempt was discovered. At first he resisted when we tried to stitch and bandage the wound but gave way at once when we threatened to have him held down by four warders.

3. *Opinion*

413 The following points are clear from the material set forth under sections 1 and 2.

414 Respondent has always been a [illegible] and a worthless [illegible] existence. He never remained at a situation for long, was continually having [illegible] and changing his [illegible] from one to the second [illegible] married [illegible] and [illegible] [illegible] opinions were [illegible] he several times resorted to [illegible] [illegible] his character [illegible] was [illegible] to [illegible] [illegible] [illegible] with [illegible] and [illegible] from [illegible] [illegible] [illegible] [illegible] [illegible] he was aware [illegible] [illegible]

unfortunate career

and lack of accuracy

than merely theatrical outcome)

rain of thought.

[illegible] He could easily have altered his position or done something to avoid being hit, especially after receiving the first blow. Instead he remained quite still and appeared at the beginning of his hunger strike as if he were [illegible]. This suggests that he was trying to simulate insanity because a previous attempt to which he pretended was obviously made in this way with the object of securing his release was unsuccessful. This also gives us the key to his behaviour during numerous cases known to science of disappearance followed by assumption of insanity and because by attempting to prove insanity and also by [illegible] in particular cases of pathological lying (*pseudologia phantastica*).

[illegible] These phenomena are observed as a result of hysteria and in most persons with an abnormal reaction or disposition to [illegible] respond more often to hysteria than degeneracy.

[illegible] Although the [illegible] epochs of distress came about only as a result of frustration and [illegible] of purpose, it is not surprising that [illegible] or [illegible] should be risked and [illegible] interest and [illegible] things that could not his apparent apathy.

[illegible] The most probable explanation is that he acted the greater part of his [illegible] while [illegible] was [illegible] but a certain [illegible] in the subconscious [illegible] [illegible] and so [illegible] a gesture and [illegible] these alternating psychic processes had a profound effect on his mental activity in other ways is shown by the difference between the work carried out [illegible] by alternate [illegible] days later.

As is clear from the [illegible] [illegible] he was [illegible] [illegible] always had a [illegible] [illegible] [illegible]

deemed punishable

439 1 The respondent is not at the moment mentally ill.

2 He is, on the other hand, a confirmed case of psychopathic inferiority with hysterical features.

3 This condition has existed presumably since birth. It does not preclude responsibility for delict, but partial responsibility must be assessed in each case.

VI

A THIRD AND FINAL OPINION ON TWO CONTRADICTORY PSYCHIATRIC DIAGNOSES

ON THE PSYCHOLOGICAL DIAGNOSIS OF FACTS

A FINAL AND FINAL OPINION ON TWO CONTRADICTORY PSYCHIATRIC DIAGNOSES[1]

452 It is not so very uncommon for two psychiatric diagnoses to be contradictory of one another, especially when as in the present case it is a question of the very elastic boundary between complete irresponsibility and partial responsibility. The peculiarity of this case consists firstly in the fact that the medical expert was confronted not with the defendant herself but merely with the reports that had previously been passed on her. In adopting this procedure the authorities were swayed by the correct view that the material already amassed in these reports was so exhaustive that further observation would be superfluous. The medical expert was able to picture without a personal examination. Secondly the case is of interest as it gives rise to a discussion of principle concerning the relation of a very important and complex piece of mental defect to hysteria. The medical expert was asked to substantiate the views expressed in the final opinion for the exculpation of the professional delinquent.

453 Our opinion is based on the existing records, etc., the legal records being specified under Documents.

454 At the same time we have tried to form an independent judgment on the basis of two consultations with the defendant in prison

[1] First published as "Ein neues und letztes Gutachten über zwei sich widersprechende psychiatrische Diagnosen," *Monatsschrift für Kriminalpsychologie und Strafrechtsreform* (Munich), II (1905–6), 691–98.—EDITORS.

Questions Asked by the Examining Magistrate

(1) Was Mrs. [illegible] partially insane when she committed the act charged against her, or was she responsible for it in a case of partial responsibility only?

(2) Was the examination of the inmates of Asylum B. complete?

Opinion As: November 17, 1904

In the case of Mrs. [illegible] I have made a careful examination of the patient and have had the benefit of the observations of the attendants and of the superintendent of the asylum. No trace of insanity has been found, and I am of the opinion that she is responsible for her acts and can be held to account for them. She is able to distinguish between right and wrong and to select the winnings.

[illegible]

[illegible]

[illegible]

existence and the [illegible] concrete correction of an anxiety dream she had in puberty. In addition there were a number of important testimonies representing the defendant as mentally abnormal.

Observation began on September 28, 1921, and the Opinion was delivered on November 17. The observation established the presence of hysterical symptoms and that the fact in Baumann's existence was a pathological self-deception in which the [illegible] herself believed. She admitted that she had borrowed the money but asserted that she meant to pay it back as soon as she received her winnings.

There were no other characteristics of intelligence and consciousness

Conclusion drawn by the Opinion. The most important [illegible] was the presence of hysteria, a basic trait of character, a constitutional anomaly, a general hysterical Experience shows that persons of this kind habitually believe even when there is no need to invent whole series of lies, however transparent for the person concerned. It goes without saying that such hysterical persons lying and fraud [illegible] the same way as with other normal people they show [illegible] an already existing tendency to deceive themselves and others. Such processes are many of the cases where normal people begin lying and cheating, and operate in these persons.

The Opinion [illegible]

Conclusion of the Opinion. The person's story is incomplete as it has been [illegible] on the documents. That answer is not the case of Assistant [illegible] statement Schultze and the [illegible] person examination. Examination by letter was [illegible]. The discovery of hysteria [illegible] hence the risk [illegible] Whether existing factors X and Y [illegible] X [illegible] nevertheless [illegible]

[illegible] Baumann [illegible] and [illegible] to appear and [illegible]

Opinion B March 23, 1905

449 EXAMINATION. ... the defendant ... stated ... a letter ... from ... Bar... ... already been ... to obtain a second.

449 ... Opinion A ... the ... was ... to the ... Opinion was ... March ... observation was ... a very ... and ... was again a ... of ... that ... pays ...

[illegible] Opinion B [illegible] very rarely. As in Opinion A [illegible] and moral stubbornness [illegible] Lack [illegible] proved first [illegible] quarter with [illegible] symptoms [illegible] terms [illegible]

[illegible] Barrington [illegible] [illegible] Development [illegible] spent [illegible] Barrington's [illegible] her she showed her wayward and rebellious nature.

[illegible] DIAGNOSIS BY DR QUINTON [illegible] the age I believe [illegible] who [illegible] tainted [illegible] from a social [illegible] hysterical [illegible] [illegible] [illegible] [illegible] She [illegible] [illegible] [illegible] [illegible]

[illegible] other, as everyday experience shows.

[illegible] experience.

[illegible] we shall return later on

[illegible] compulsion emanated from this idea.

[illegible] ence on her actions.

Final Opinion

465 [illegible] and hysterical person.

466 [illegible] hysteria on criminal actions.

467 [illegible] out of the question.

moral defect?

pulsion

tion of responsibility

to cause total irresponsibility?

roots in hysteria and not in moral defect

responsibility

our knowledge and conscience

partial responsibility can be assumed

strated to the public.

ON THE PSYCHOLOGICAL DIAGNOSIS OF FACTS[1]

478 As readers of the *Centralblatt* may be aware, the psychological diagnosis of facts has recently been the object of some discussion. The essence of psychological diagnosis consists in bringing to light, by means of associations, the complexes of ideas relating to a crime. In our work on "The Association of Normal Subjects," Riklin and I put forward the concept of the feeling-toned complex and described its effects on the associations. These effects were examined in greater detail in my inaugural paper on "Reaction-Time in Association Experiments." The discovery of feeling-toned complexes in the associations of insane persons has been of great help to us in our diagnostic work for the past two years, as is apparent from a number of publications by Riklin and myself.

479 After the publication of my studies in word association, an article by Wertheimer and Klein appeared in Volume XV of the *Archiv für Kriminalanthropologie und Kriminalistik*, on the psychological diagnosis of facts.[2] The authors discuss, in the main, the possibility of finding, through the associations, the

first published as "Zur psychologischen Tatbestandsdiagnostik." *Zentralblatt für Nervenheilkunde und Psychiatrie*, 24 pag., XXVIII N.S. XV, 1 (November, 1905), 2 pp. Editor's note.

[1] This and the other works of Jung's mentioned in this paper are in *Experimental Researches*, Vol. II of the *Collected Works*. The studies on word association were published in 1904–5. Editor's note.

[2] "Psychologische Tatbestandsdiagnostik," 1904.

Monatsschrift [4])

480 beyond the laboratory stage.

481

482

483

ward was really a thief. He now asked me to hypnotize the young man and question him under hypnosis. As can readily be understood, I declared this strange request but proposed instead an association test which could be rendered plausible enough in the form of a consultation. We suspected the culprit had wanted to consult me once before on account of his nervous troubles. His guardian agreed to the plan and this morning the young man came up for the consultation. I had to compose previously a test list of one hundred stimulus words with the critical words designed to hit the complex. The experiment was to be carried out secretly, but in order to determine the critical reactions still more precisely I decided to employ my reproduction procedure as well. The complex on the theft was then revealed so plainly by the associations that I was able to tell the young man with the assurance: "You have been stealing." He paled, was completely nonplussed for a moment, and after a little hesitation broke down and tearfully admitted to me the theft.

484 I would merely like to add to this provisional report that the effects of a theft complex on the associations are primarily exactly the same as in the case of any other complex of similar emotional intensity. For further details I must refer the reader to the forthcoming publication.

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BIBLIOGRAPHY

The items in the bibliography are arranged alphabetically under two headings: I. List of periodicals cited with abbreviations. II. General bibliography including books and articles. It has not been possible to establish the full names of some medical writers cited in the early literature.

I. LIST OF PERIODICALS CITED WITH ABBREVIATIONS

Allg Z f Psych — *Allgemeine Zeitschrift für Psychiatrie und psychisch-gerichtliche Medicin.* Berlin.

Ann med psych — *Annales médico-psychologiques.* Paris.

Arch f ges Psych — *Archiv für die gesamte Psychologie.* Leipzig.

Arch f Kriminalanthr u Kriminalstatistik — *Archiv für Kriminalanthropologie und Kriminalstatistik.* Leipzig.

Arch f Psychiat u Nervenkrankh — *Archiv für Psychiatrie und Nervenkrankheiten.* Berlin.

Arch de neur — *Archives de neurologie.* Paris.

Brain. A Journal of Neurology London

Centralbl f Nervenh u Psych — *Centralblatt für Nervenheilkunde und Psychiatrie.* Berlin and Leipzig

J de Psychiat Journal des Maladies mentales et nerveuses Paris

Friedreich's Blätter für gerichtliche Medizin und Sanitätspolizei Nuremberg.

Harper's Magazine New York.

Jahrb f Psych u Neur — *Jahrbuch für Psychiatrie und Neurologie* Leipzig and Vienna

Journ f Psych u Neur — *Journal für Psychologie und Neurologie* Leipzig (A continuation of the *Zeitschrift für Hypnotismus* q.v.)

Mind A quarterly review of psychology and philosophy London

Monatsschr f Kriminalpsychologie u Strafrechtsreform Edited by Gustav Aschaffenburg Heidelberg.

Munch med Wochenschr — *Münchener Medizinische Wochenschrift.* Munich

Neur Centralbl — *Neurologisches Centralblatt* Berlin

Proc Soc Psych Res — *Proceedings of the Society for Psychical Research.* London.

Prog méd — *Progrès médical.* Paris.

Rev de l'Hyp — *Revue de l'hypnotisme* Paris

Rev ph — *Revue philosophique de France et de l'Étranger* Paris

Sammel ver päd Psych — *Sammelung von Abhandlungen aus dem Gebiete der pädagogischen Psychologie und Physiologie* Berlin

Trans Coll Phys Philadelphia — *Transactions of the College of Physicians of Philadelphia.*

Trib méd — *Tribune médicale* Paris.

Union méd — *Union médicale* Paris.

Wiener med Presse — *Wiener medizinische Presse* Vienna

Z f Hyp — *Zeitschrift für Hypnotismus Psychotherapie etc* Leipzig (Continued as the *Journal für Psychologie und Neurologie* q.v.)

Z f Strafr — *Zeitschrift für Strafrecht* Switzerland

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